

PERIODIC ESTIMATE FOR PARTIAL PAYMENT

State of Montana - Department of Administration
Architecture & Engineering Division

PROJECT: _____
 LOCATION: _____
 CONTRACTOR: _____
 ADDRESS: _____

A/E # _____
 PAY ESTIMATE # _____
 DATE: _____
 From: _____ To: _____
 Phone: _____

| RETAINAGE ADJUSTMENT | |
|-------------------------------|----|
| 1. Total Retainage to Date: | \$ |
| 2. Less Securities Deposited: | \$ |
| 3. Retainage Withheld (1.-2.) | \$ |

| CONTRACT AMOUNT STATUS | |
|-------------------------------------|----|
| 1. Original Contract Amount: | \$ |
| 2. Net +/- by Change Order(s): | \$ |
| 3. Contract Amount to Date (1.+2.): | \$ |

| CHANGE ORDER SUMMARY | | | |
|----------------------|-------------|-----------|------------|
| No. | Date Apprvd | Additions | Deductions |
| | | + \$ | - \$ |
| | | + \$ | - \$ |
| | | + \$ | - \$ |
| | | + \$ | - \$ |
| | | + \$ | - \$ |
| TOTALS: | | + \$ | - \$ |
| | | \$ | |

| CONTRACT STATUS | |
|--------------------------------------|-----------|
| 1. Work in Place (from next page): | \$ |
| 2. Total Work & Stored Material: | \$ |
| 3. Retainage Withheld: | \$ |
| 4. Total Earned Less Retainage: | \$ |
| 5. Less Previous Payments (+1% Tax): | \$ |
| 6. Amount Due This Payment: | \$ |
| 7. Less 1% State Contractor's Tax: | \$ |
| 8. Payment Due Contractor: | \$ |

NOTE: Request for Final Payment must be accompanied by:

1. *Certificate of Substantial Completion.*
2. *Consent of Surety Company of Final Payment.*
3. *Contractor's Affidavit of Completion, Payment of Debts and Claims, and Release of Liens.*
4. *Requisite warranties, operations and maintenance manuals, etc.*

I hereby certify that this submitted claim for payment is correct, true and just in all respects and that payment or credit has not previously been received. I further warrant and certify by submission of this claim that all previous work for which payment has been received is free and clear of all liens, claims, security interests or encumbrances in favor of the Contractor, subcontractors, material suppliers or other persons or entities and do hereby release the Owner from such.

Submitted by: _____ (Company/Contractor) _____ (Name) _____ (Date)

Reviewed by: _____ (Architect/Engineer) _____ (Name) _____ (Date)

Approved by: Architecture & Engineering Division _____ (Name) _____ (Date)

WORK IN PLACE/STORED MATERIALS

State of Montana - Department of Administration

Architecture & Engineering Division

PROJECT: _____

LOCATION: _____

A/E # _____

PAY ESTIMATE # _____

DATE: _____

| A | B | C | D | E | F | G | | H | I | |
|----------|---------------------|-----------------|---|-----------------------|--|--|---------|-------------------------|-------------|--------------|
| ITEM NO. | DESCRIPTION OF WORK | SCHEDULED VALUE | WORK COMPLETED PREVIOUS APPLICATION (D+E) | WORK DONE THIS PERIOD | MATERIALS PRESENTLY STORED (NOT IN D OR E) | TOTAL COMPLETED AND STORED TO DATE (D+E+F) | % (G/C) | BALANCE TO FINISH (C-G) | % RETAINAGE | \$ RETAINAGE |
| | | | | | | | | | | |